

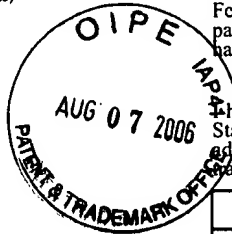
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22932 7590 05/05/2006
IMMUNEX CORPORATION
LAW DEPARTMENT
1201 AMGEN COURT WEST
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Edwin Scheibler (Depositor's name)
Edwin Scheibler (Signature)
8-07-06 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

08/910,449 08/05/1997 RAYMOND G. GOODWIN 2801-C 2606

TITLE OF INVENTION: 4-IBB POLYPEPTIDES DNA ENCODING 4-IBB POLYPEPTIDES

08/10/2006 BABRAHA2 00000068 090009 00910449

01 FC:1501 1400.00 DA
02 FC:8001 15.00 DA

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|-----------|-----------------|------------------|----------|
|-------------|--------------|-----------|-----------------|------------------|----------|

nonprovisional NO \$1400 \$0 \$1400 08/07/2006

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

SPECTOR, LORRAINE 1647 424-185100

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- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Christine M. Bellas
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Immunex Corporation

Seattle, Washington

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 5

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Christine M. Bellas

Date Aug 7, 2006

Typed or printed name Christine M. Bellas

Registration No. 34,122

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